PTO/SB/22 (12-04)
Approved for use through 7/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE pond to a collection of information unless if displays a valid OMB control number.

| 10 to 5 | Under the Paperwork Reduction Act of 1995, no pe | ersons are required to respon | d to a collection of information | unless if displays a valid OMB | | | | | | |
|---|--|-----------------------------------|----------------------------------|--------------------------------|--|--|--|--|--|--|
| PETITION | FOR EXTENSION OF TIME UNDER | Docket Number (Optional) | | | | | | | | |
| RADEMAR | FY 2005 suant to the Consolidated Appropriations Ac | 4274-0101P | | | | | | | | |
| Application | | | Filed M | arch 1, 2002 | | | | | | |
| | | | | | | | | | | |
| For METHOD AND APPARATUS FOR DYNAMIC BANDWIDTH CONTROL IN A BROADCAST OPTICAL COMMUNICATIONS NETWORK | | | | | | | | | | |
| Art Unit | 2633 | | Examiner | T. Q. Le | | | | | | |
| This is a reidentified a | equest under the provisions of 37 CFR 1. application. | .136(a) to extend the | period for filing a repl | y in the above | | | | | | |
| The reque | sted extension and fee are as follows (ch | neck time period desi | red and enter the app | ropriate fee below): | | | | | | |
| | 7 | <u>Fee</u> | Small Entity Fee | | | | | | | |
| X | One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ 120.00 | | | | | | |
| | Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 | \$ | | | | | | |
| | Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 | \$ | | | | | | |
| | Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 | \$ | | | | | | |
| | Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | \$ | | | | | | |
| Applicant claims small entity status. See 37 CFR 1.27. | | | | | | | | | | |
| X A check in the amount of the fee is enclosed. | | | | | | | | | | |
| Payment by credit card. Form PTO-2038 is attached. | | | | | | | | | | |
| The Director has already been authorized to charge fees in this application to a Deposit Account. | | | | | | | | | | |
| X The | e Director is hereby authorized to charge | any fees which may | be required, or credit | any overpayment, to | | | | | | |
| The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number02-2448 I have enclosed a duplicate copy of this sheet. | | | | | | | | | | |
| | | | | | | | | | | |
| I am the | e applicant/inventor. | | | | | | | | | |
| assignee of record of the entire interest. See 37 CFR 3.71. | | | | | | | | | | |
| Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | | | | | | | | |
| | attorney or agent of record. | Registration Number | • | | | | | | | |
| | x attorney dragent under 37 (| CFR 1.34. | | | | | | | | |
| | Registration number if acting | under 37 CFR 1.34 | 29,680 | <u> </u> | | | | | | |
| | | (#4G,439 | Septemb | er 6, 2005 | | | | | | |
| Signature Date | | | | | | | | | | |
| Michael K. Mutter Typed or printed name | | | (703) 205-8000 | | | | | | | |
| | | | | | | | | | | |
| | gnatures of all the inventors or assignees of record of the ignature is required, see below. | ne entire interest or their repre | esentative(s) are required. Su | bmit multiple forms if more | | | | | | |
| Ė τ | otal of 1 forms are subr | nitted. | | | | | | | | |

09/07/2005 SZEWDIE1 00000018 10084997

01 FC:1251

120.00 OP

Complete if Known

PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

| PACE pursuant to the Consolid | lated Appropriati | r. ons Act, 2005 (H.R. 4 | 818). Ap | plication Num | ber | 10/084,997-C | onf. #1126 | | | | | |
|---|--|-------------------------------|-----------|--------------------------|-------------|--------------------------|---------------|--------------|--|--|--|--|
| FEE TRANSMITTAL | | | | Filing Date | | March 1, 2002 | | | | | | |
| For | Fir | First Named Inventor | | Christopher RUTLEDGE | | | | | | | | |
| <u>For</u> | Ex | Examiner Name | | T. Q. Le | | | | | | | | |
| Applicant claims sm | Art | Art Unit | | 2633 | | | | | | | | |
| TOTAL AMOUNT OF PA | Att | Attorney Docket No. 4274-0101 | | | | | | | | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | | | | | | |
| x Check Credit Card Money Order None Other (please identify): | | | | | | | | | | | | |
| Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP | | | | | | | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | | | | | | | |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee | | | | | | | | | | | | |
| Thange lee(s) indicated below. X Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 X Credit any overpayments | | | | | | | | | | | | |
| FEE CALCULATION | | | | | | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | | | | | | |
| | FILIN | G FEES | | H FEES | EXAMIN | NATION FEES | _ | | | | | |
| Application Type | Fee (\$) | Small Entity Fee (\$) F | ee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fees Pa | aid (\$) | | | | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | | | | | | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | | | | | | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | | | | | | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | | | | | | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | | | | | | |
| 2. EXCESS CLAIM FEES | | 100 | Ū | v | v | v | | Small Entity | | | | |
| Fee Description | | | | | | | Fee (\$) | Fee (\$) | | | | |
| Each claim over 20 (inclu | ding Reissues |) | | | | | 50 | 25 | | | | |
| Each independent claim o | ver 3 (includii | ng Reissues) | | | | | 200 | 100 | | | | |
| Multiple dependent claim | S | | | | | | 360 | 180 | | | | |
| Total Claims Extra | a Claims F | Fee (\$) | Fee Paid | (\$) | М | ultiple Depend | dent Claims | | | | | |
| - 20 = | x _ | | | | | e (\$) | Fee Paid (\$) | | | | | |
| | | | | | | - | | _ | | | | |
| Indep. Claims Extra | a Claims F | ee (\$) = | Fee Paid | (\$) | | | | | | | | |
| 3. APPLICATION SIZE FE | | | | | | | | | | | | |
| If the specification and d | Irawings excee | d 100 sheets of p | aper (exc | luding electro | nically fil | ed sequence of | r computer | | | | | |
| listings under 37 CFF | | | | | or small er | ntity) for each a | additional 50 | | | | | |
| sheets or fraction ther | | | | | | | | | | | | |
| | Extra Sheets | | | onal 50 or frac | | | | aid (\$) | | | | |
| - 100 = /50 (round up to a whole number) x = = | | | | | | | | | | | | |
| 4. OTHER FEE(S) Non-English Specifics | tion \$130 fe | e (no small entity | discount | ` | | | rees r | raiu (\$) | | | | |
| Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): #251 Extension for response within first month 120.00 | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| SUBMITTED BY Signature | / | 1-1-11-4C | Regi | stration No. | 29,680 | Telephone | (703) 205 | -8000 | | | | |
| — 1 | K. Mutter | Xlen | (Atto | rney/Agent) | 25,000 | | | | | | | |
| Ivania (Fillio Type) Iviichael | N. WIULLET | - | | | | Date | September | 0, 2005 | | | | |